|   |  |   |                                       |                               |                      |                  |            | Application or Docket Number |                        |         |            |                        |
|---|--|---|---------------------------------------|-------------------------------|----------------------|------------------|------------|------------------------------|------------------------|---------|------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003                 |  |   |                                       |                               |                      |                  |            | 10658577                     |                        |         |            |                        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                       |                               |                      |                  |            | E C                          | YIIIY                  | OR      | OTHER      |                        |
| TOTAL CLAIMS  |  |   | 55                                    | 7                             |                      |                  | R          | ATE                          | FEE                    |         | RATE       | FEE                    |
| FOR   |  |   | NUMBER FILED                          |                               | NUMBER EXTRA         |                  | BAS        | IC FEE                       | 375.00                 | OR      | Basic Fee  | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 5. × minus 20= .                      |                               | • 3 8                |                  | [x         | X\$ 9 3 3 47                 |                        | OR      | X\$18=     |                        |
| INDEPENDENT CLAIMS  |  |   | U minus 3 =                           |                               |                      |                  | ×          | X42= 42.                     |                        | OR      | X84=       |                        |
| MU  | LTIPLE DEPEN   | IDENT CLAIM P                             | RESENT                                |                               |                      |                  |            | +140=                        |                        | OR      | +280=      |                        |
| • #   | the difference   | in column 1 is                            | less than zero, enter "0" in column 2 |                               |                      |                  |            | TAL                          | 259                    |         | TOTAL      |                        |
| CLAIMS AS AMENDED - PART II   |  |   |                                       |                               |                      |                  |            | ,,,,,,                       | 234                    | On      | OTHER      | THAN                   |
| (Column 1) (Column 2) (Column 3)  |  |   |                                       |                               |                      |                  | SR         | IALL                         | ENTITY                 | OR      | SMALL      |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID | BER                  | PRESENT<br>EXTRA | RAT        | ATE                          | ADDI-<br>TIONAL<br>FEE |         | RATE       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 18                                      | Minus                                 | -2                            | e                    | - /              | X          | 9-                           |                        | OR      | X\$18=     |                        |
|   | Independent  | . 4                                       | Minus                                 |                               |                      |                  | ×          | 42=                          |                        | OR      | X84=       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                                       |                               |                      | اللب             | .1         | 40-                          |                        | OR      | +280=      |                        |
| 1 1   |  |   |                                       |                               |                      |                  |            | TOTAL                        |                        | 00      | TOTAL      |                        |
| S/24/05 (Column 1) (Column  |  |   |                                       |                               |                      | (Column 3)       | ADDI       | T. FEE                       |                        | Jon.    | ADOIT. FEE |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA | R          | ATE                          | ADDI-<br>TIONAL<br>FEE |         | RATE       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 56                                      | Minus                                 | -7                            | 8                    | • —              | ×          | 9=                           |                        | OR      | X\$18=     |                        |
|   | Independent  | • 3                                       | Minus                                 | ese (                         | CLADA                | -                | X          | 12-                          |                        | OR      | X84=       |                        |
| _   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                       |                               |                      |                  |            | 40-                          |                        | OR      | +280=      |                        |
|   |  |   |                                       |                               |                      |                  |            | TOTAL                        |                        | OR      | TOTAL      |                        |
| 2   | (Column 1) (Column 2) (Column 3)   |   |                                       |                               |                      |                  |            |                              |                        |         | auri. Febi |                        |
| AMENDMENTC  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                                       | HIGH                          | EST<br>BER<br>OUSLY  | PRESENT<br>EXTRA | R          | ATE                          | ADDI-<br>TIONAL<br>FEE |         | RATE       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus                                 | **                            |                      | •                | X          | 9-                           |                        | OR      | X\$18=     |                        |
|   | Independent  | •   | ewiM                                  |                               |                      | =                |            | 12-                          |                        |         | X84=       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                       |                               |                      |                  | -^         | -2-                          |                        | OR      | A048       |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                                       |                               |                      |                  |            |                              |                        |         | +280=      | ·                      |
| -   | "If the entry is counting to less than the entry is counting 2, write the counting and the proviously Paid For EN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE ORDIT. FEE |   |                                       |                               |                      |                  |            |                              |                        |         |            |                        |
|   | The Highest Nun  | nber Proviously Pe                        | d For (Total o                        | x Independ                    |                      | o Highest numbe  | r found in | th ap                        | propriate ba           | i in co | lumo 1.    | •                      |